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| Special Instructions to | Filing Officer: | | | | |
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Office Use Only



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TALL AHASSEE, FLORID.

R.A. Change C.COULLIETTE

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EXAMINER



NATIONWIDE REGISTERED AGENT, FILING, RESEARCH AND LIBRARY SERVICES

ALBANY ~ CHARLOTTE ~ CHICAGO ~ DOVER ~ LOS ANGELES ~ NEW YORK ~ SACRAMENTO ~ SPRINGFIELD ~ WASHINGTON, DC

January 12, 2010

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Willconsco, Inc.

Dear Sir/Madam:

For your information, the above company is qualified to do business in your state and we now enclose the necessary documents required to affect Change of Agent to National Corporate Research, Ltd.

In connection with this matter, we ask that you please have it filed in your office upon receipt and return the evidence to this office by means of the self-addressed envelope which we have enclosed for your convenience.

We also enclose our check made payable to your state in payment of filing fees.

Should you have any questions in regard to the above, please do not hesitate to give me a telephone call.

Sincerely,

Kathy Butler Client Service Specialist

KAB ENCLOSURE REGULAR MAIL

E-MAIL: INFO@NATIONALCORP.COM

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| - | provisions of sections 60 ange is submitted for a co | | | | tes, this Georgia | | | | |
|---|---|--|--|---|-----------------------------------|---------------|--|--|--|
| - | ge its registered office o | - | - | | | | | | |
| 1. The name of the | | | | | | | | | |
| | • | Willcon | sco, Inc. | | | | | | |
| 2. The principal of | office address: | | | | | | | | |
| 1012 Coggins Place | | Marietta | G | GA 30060 | | | | | |
| | ddress (if different): | | | | | | | | |
| 4. Date of incorporation/qualification: 01/02/2002 | | 01/02/2002 | Document number: F0200000027 | | | | | | |
| 5. The name and Florida Depart | street address of the cu | rrent registered agen | | *************************************** | e | | | | |
| | | C T Corporat | ion System | | | | | | |
| 1200 South Pine Island Road | | | | | | | | | |
| Plantation | | ation | FL 3332 | | JAN 19 | - | | | |
| 6. The name and (if changed): | street address of the ne | • • • • | f changed) and /or re | - | PH 12: 07 Y OF STATE SEE, FLORID | 3 | | | |
| 515 East Park Avenue | | | | | | | | | |
| | (P.O. Box NOT acceptable) | | | | | | | | |
| Tallaha | | assee | Florida | Florida 32301 | | | | | |
| The street address changed will | ss of its registered office be identical. | ce and the street add | lress of the business | office of its re | gistered agent | | | | |
| Such change wa authorized by th | s authorized by resolute board, or the corpora | tion duly adopted by ttion has been notifi | y its board of directo ed in writing of the | ors or by an offi change. | icer so | land Tark | | | |
| Jeanet | te R. Dyles | 1-7-10 | Jeanett | R. Dyl | is Sect | etary | | | |
| I hereby accept to further agree to of my duties, and document is being | ignature of an officed or directo the appointment as reg o comply with the prov d I am familiar with an ng filed merely to refle been notified in writin | sistered agent and a visions of all statutes ad accept the obliga ct a change in the ro | gree to act in this co s relative to the proj | ēer and comple. | te performanc | ce is e | | | |
| Karly | A. Butler | Asst. Sec. | | 1-11-2010 | > | | | | |
| (Signature of Registered Agerit) | | | (Date) | | | | | | |
| If signing on bel | half of an entity: | | | | | | | | |
| Nationa | al Corporate Resea | arch, Ltd. | | | | | | | |
| | (Typed or Printed Name) | | | | | | | | |

* * * FILING FEE: \$35.00 * * *